

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Pillar et al.
Title: USER INTERFACE AND
METHOD FOR VEHICLE
CONTROL SYSTEM

Appl. No.:

Filing Date:

Examiner:

Art Unit:

CERTIFICATE OF EXPRESS MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450.	
EL 979074130 US	10/10/03
(Express Mail Label Number)	(Date of Deposit)
Carolyn Simpson (Printed Name)	
<i>Carolyn Simpson</i> (Signature)	

16235 U.S. PTO
10/683878
101003

UTILITY PATENT APPLICATION
TRANSMITTAL

Mail Stop PATENT APPLICATION
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

DUANE R. PILLAR
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Enclosed are:

- [X] Specification, Claim(s), and Abstract (44 pages).
- [X] Informal drawings (6 sheets, Figures 1, 2, 3, 4, 5, 6, 7).
- [X] Application Data Sheet (37 CFR 1.76).
- [X] Claim for Convention Priority.

The filing fee is calculated below:

	Claims as Filed		Included in Basic Fee		Extra Claims		Rate		Fee Totals
Basic Fee							\$770.00		\$770.00
Total	31	-	20	=	11	x	\$18.00	=	\$198.00
Claims:									
Independ	4	-	3	=	1	x	\$86.00	=	\$86.00
ents:									
If any Multiple Dependent Claim(s) present:						+	\$290.00	=	\$0.00
Surcharge under 37 CFR 1.16(e) for late filing of Executed Declaration and late payment of filing fee						+	\$130.00	=	\$130.00
							SUBTOTAL:	=	\$1184.00
[]							Small Entity Fees Apply (subtract ½ of above):	=	\$0.00
							TOTAL FILING FEE:	=	\$1,184.00

- [X] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- [] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date October 10, 2003

By Scott C. Nielson

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